HCFA-PM-91-4

August 1991

(BPD)

OMB No.: 0938-

State/Territo	rv:	Mississippi		
_			 	

Citation

4.18 Recipient Cost Sharing and Similar Charges

42 CFR 447.51 through 447.58 (a) Unless a waiver under 42 CFR 431.55(g) applies, deductibles, coinsurance rates, and copayments do not exceed the maximum allowable charges under 42 CFR 447.54.

1916(a) and (b) of the Act

- (b) Except as specified in items 4.18(b)(4), (5), and (6) below, with respect to individuals covered as categorically needy or as qualified Medicare beneficiaries (as defined in section 1905(p)(1) of the Act) under the plan:
 - (1) No enrollment fee, premium, or similar charge is imposed under the plan.
 - (2) No deductible, coinsurance, copayment, or similar charge is imposed under the plan for the following:
 - (i) Services to individuals under age 18, or under--

<u>/</u>/ Age 19

<u>/</u>/ Age 20

<u>/</u>/ Age 21

Reasonable categories of individuals who are age 18 or older, but under age 21, to whom charges apply are listed below, if applicable.

(ii) Services to pregnant women related to the pregnancy or any other medical condition that may complicate the pregnancy.

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Citation

4.18(b)(2) (Continued)

42 CFR 447.51 through 447.58

- (iii) All services furnished to pregnant women.
 - Γ1 Not applicable. Charges apply for services to pregnant women unrelated to the pregnancy.
- (iv) Services furnished to any individual who is an inpatient in a hospital, long-term care facility, or other medical institution, if the individual is required, as a condition of receiving services in the institution, to spend for medical care costs all but a minimal amount of his or her income required for personal needs.
- (v) Emergency services if the services meet the requirements in 42 CFR 447.53(b)(4).
- Family planning services and supplies (vi) furnished to individuals of childbearing age.
- (vii) Services furnished by health a maintenance organization in which the individual is enrolled.
- (viii) Services furnished to an individual 1916 of the Act, receiving hospice care, as defined in section 1905(o) of the Act.

P.L. 99-272, (Section 9505)

> Approval Date March 16, 1992
>
> Approval Date March 16, 1992 January I, 1992 Date Received January 30, 1992

Revision:		-PM-91-4 st 1991		(BPD)			O	MB No.: 0	938-
State/Territ	tory:_	Mi	ssissippi					•	
Citation		4.18(b)	(Con	tinued)				
42 CFR 447. through 447.48	51		(3)	nomin simila not	<u>nal</u> dec ar chai	iver under 42 luctible, coin rges are impos ed from suc ve.	isurance c sed for ser	opayment vices that	, or
				<u> </u>	Not impo	applicable. sed.	No such	charges	are
				(i)		nny service, n ge is imposed		an one tyr	e of
	<u>.</u>			(ii)		ges apply to ollowing age		furnishe	d to
					<u></u>	18 or older			
					<u></u>	19 or older			
					<u> </u>	20 or older			
					<u> </u>	21 or older			
					<u> </u>	Charges furnished reasonable listed below or older bu	to th categories v who are 1	e follow of individ .8 years of	ving luals

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State/Territory: Mississippi

Citation

4.18(b)(3) (Continued)

42 CFR 447.51 through 447.58

- (iii) For the categorically needy and qualified Medicare beneficiaries, ATTACHMENT 4.18-A specifies the:
 - (A) Service(s) for which a charge(s) is applied;
 - (B) Nature of the charge imposed on each service;
 - (C) Amount(s) of and basis for determining the charge(s);
 - (D) Method used to collect the charge(s);
 - Basis for determining whether an (E) individual is unable to pay the charge and the means by which such an individual is identified to providers;
 - (F) Procedures for implementing and enforcing the exclusions from cost sharing contained in 42 CFR 447.53 (b); and
 - (G) Cumulative maximum that applies to all deductible, coinsurance or copayment charges imposed on a specified time period.



Not applicable. There is no maximum.

TN No. 92-02 Supersedes TN No. 90-12

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Citation 1916(c) of the Act

4.18(b)(4) //

A monthly premium is imposed on pregnant women and infants who are covered under section 1902(a)(10)(A)(ii)(IX) of the Act and whose income equals or exceeds 150 percent of the Federal poverty level applicable to a family of the size involved. The requirements of section 1916(c) of Act the are ATTACHMENT 4.18-D specifies the method the State uses for determining the premium and the criteria for determining what constitutes undue hardship for waiving payment of premiums by recipients.

1902(a)(52) 4.18(b)(5) $\overline{//}$ and 1925(b) $\overline{/}$ of the Act

For families receiving extended benefits during a second 6-month period under section 1925 of the Act, a monthly premium is imposed in accordance with sections 1925(b)(4) and (5) of the Act.

1916(d) of 4.18(b)(6) $\overline{//}$ the Act

A monthly premium, set on a sliding scale, imposed on qualified disabled and working individuals who are covered under section 1902(a)(10)(E)(ii) of the Act and whose income exceeds 150 percent (but does not exceed 200 percent) of the Federal poverty level applicable to a family of the size involved. The requirements of section 1916(d) of the Act are met. ATTACHMENT 4.18-E specifies the method and standards the State uses for determining the premium.

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March 16, 1992
January 30, 1992

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State/Territor	ry:	Miss	sissippi	<u> </u>			·
Citation	4.	18(c) <u>Ī</u>	_/ Indi _plan		are co	vered	as medically needy under the
42 CFR 447.58 though 447.58			(1)	<u> </u>	charg specif for su allows define effect	re is implies the ach charles the charles the con recomment	nt fee, premium or similar posed. ATTACHMENT 4.18-Be amount of and liability period arges subject to the maximum arges in 42 CFR 447.52(b) and State's policy regarding the cipients of non-payment of the fee, premium, or similar
447.51 throug 447.58			(2)		or sin	nilar c	le, coinsurance, copayment harge is imposed under the following:
	4				(i)		ces to individuals under age
						<u></u>	Age 19
						<u></u>	Age 20
						<u></u>	Age 21
						who a to wh	nable categories of individuals re age 18, but under age 21, om charges apply are listed , if applicable:

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Mississippi State/Territory: _ Citation 4.18(c)(2) (Continued) Services to pregnant women related to 42 CFR 447.51 (ii) the pregnancy or any other medical through 447.58 condition that may complicate the pregnancy. (iii) All services furnished to pregnant women. Not applicable. Charges apply for services to pregnant women unrelated to the pregnancy. Services furnished to any individual (iv) who is an inpatient in a hospital, long-term care facility, or other medical institution, if the individual is required, as a condition of receiving services in the institution, to spend for medical care costs all but a minimal amount of his income required for personal needs. (V) Emergency services if the services meet the requirements in 42 CFR 447.53(b)(4). Family planning services and supplies (vi) furnished to individuals of childbearing age. Services furnished to an individual 1916 of the Act, (vii) P.L. 99-272 receiving hospice care, as defined in (Section 9505) section 1905(o) of the Act. (viii) Services provided by a health 447.51 through maintenance organization (HMO) to en-447.58 rolled individuals. X Not applicable. No such charges

are imposed.

TN No. 95-19 Effective Date 10-1-95 1-22-96 Approval Date Supersedes TN No. 92-02 Date Received <u>12-29-95</u>

Revision:		A-PM-91-4 ast 1991		(BPD) OMB No.: 0938-		
State/Territory: Mississ			ssippi	·		
Citation		4.18(c)(3)	Unless a waiver under 42 CFR 431.55(g) applies nominal deductible, coinsurance, copayment, or similar charges are imposed on services that are not excluded from such charges under item (b)(2) above.			
			<u></u>	Not applicable. No such charges are imposed.		
			(i)	For any service, no more than one type of charge is imposed.		
			(ii)	Charges apply to services furnished to the following age group:		
				$\overline{//}$ 18 or older		
	÷			$\overline{//}$ 19 or older		
				$\overline{/}$ 20 or older		
				$\overline{/}$ 21 or older		
				Reasonable categories of individuals who are 18		

years of age, but under 21, to whom charges apply are listed below, if applicable.

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State/Territory: Mississippi

Citation

4.18(c)(3) (continued)

447.51 through 447.58

- (iii) For the medically needy, and other optional groups, ATTACHMENT 4.18-C specifies the:
 - (A) Service(s) for which charge(s) is applied;
 - Nature of the charge imposed on each (B) service;
 - Amount(s) of and basis for determining (C) the charge(s);
 - (D) Method used to collect the charge(s);
 - (E) Basis for determining whether an individual is unable to pay the charge(s) and the means by which such an individual is identified to providers;
 - (F) Procedures for implementing enforcing the exclusions from cost sharing contained in 42 CFR 447.53(b); and
 - (G) Cumulative maximum that applies to all deductible, coinsurance, or copayment charges imposed on a family during a specified time period.
 - ΓI There is no Not applicable. maximum.

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